And providence of the control of the

Application or Docket Number

109112-116

Effective October 1, 2000									17/	7:	<u>5 /</u> 5	$\circ$ $\circ$
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY	Ão	OTHE	THAN ENTITY
TOTAL CLAIMS			133				Γ	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUM	NUMBER EXTRA		ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			36minus 20=		• 1	113		X\$ 9=		OR	X\$18⇒	
INDEPENDENT CLAIMS			91 m	inus 3 =	. 6	9	X40=				X80=	
MŁ	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				·  -		<del>                                     </del>	OR		
* If the difference in column 1 is less than zero					"0" in	column 2		+135=		OR	+270=	
CLAIMS AS AMENDED - PART II							7	OTAL	Ь	OR	TOTAL	
		(Column 1)	(Column 2) (Column 3)			s	MALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.39	Minus	" 1		=	;	K\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	•** C		-	Г	X40=		OR	X80=	
_	TINOT PRESE	SVIAHON OF IM	JETIPLE DE	PENUENI	CLAIM	للل	T.	135=		OR	+270=	
								TOTAL		OR	TOTAL	
ADDIT. FEE (Column 1) (Column 2) (Column 3)										,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	r	HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		2	>	(\$9≃		OR	X\$18=	
	Independent	NTATION OF MI	Minus	PENIDENIT	CLAIM	=	>	<b>(40=</b>		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								135=		OR	+270=	
							ADD	TOTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colun		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	×	\$ 9=		OB	X\$18=	
	Independent	•	Minus	***		=	$\vdash$	40=			X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		H	=0+		OR		
	If the entry in colum	mn 1 is less than th	e entry in col-	enn 9 weita	*0* in	humo 2	+	135=		OR	+270≃	
***	If the "Highest Nu	mber Previously Par mber Previously Par mber Previously Par mber Previously Par	id For IN THI	S SPACE is	less tha	n 20, enter "20."		TOTAL IT. FEE n the app	ropriate box		TOTAL ADDIT: FEE JMN 1.	